

INTERGENERATIONAL DANCE IN LONG-TERM RESIDENTIAL CARE:

Social Citizenship in Dementia Care

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PEOPLE LIVING WITH DEMENTIA are often viewed through a reductionist lens whereby a focus on their deficits and differences obscures their enduring abilities and potential. Throughout the last century the dominant biomedical model supported this view, with its focus on biological factors and its goals of cure and control.¹ From this perspective, as cognition and memory declines, the *person* with dementia is seen to be lost while her or his body lives on; this calls into question her/his identity and personhood.² However, in recent decades, a growing body of literature has emerged taking a broader view of the person with dementia. In contrast to the biomedical model, this perspective recognizes the enduring potential of persons living with dementia to experience meaningful interactions and relationships despite their losses.³ From this perspective, personhood is understood to be preserved.⁴

This broader understanding of people living with dementia has significant implications for current and future directions in dementia care programming. Currently, opportunities for participating in meaningful activities and social relationships are limited, reflecting perceptions of people living with dementia primarily in terms of functional losses

* The authors would like to thank Lee Kwidzinski, artistic director and creator, Imagine Dance. This project was supported by the Social Sciences and Humanities Research Council of Canada.

¹ Anthea Innes, "What Is Dementia? Unpacking What Is Known," in *Dementia Studies: A Social-Science Perspective*, 1–26 (London: Sage, 2009).

² Tom Kitwood, *Dementia Reconsidered: The Person Comes First* (Croydon, UK: Open University Press / McGraw Hill Education, 1997), 7–19; Renée Beard, "In Their Voices: Identity Preservation and Experiences of Alzheimer's Disease," *Journal of Ageing Studies* 18 (2004): 418–28.

³ Julian C. Hughes, *How We Think about Dementia: Personhood, Rights, Ethics, the Arts and What They Mean for Care* (London, UK: Jessica Kingsley Publishers, 2014), 56–90; Alisoun Milne, "Living with Dementia in a Care Home: Capturing the Experiences of Residents," *Quality in Ageing and Older Adults* 12, 2 (2011): 76–85.

⁴ For further discussion of this perspective, see also the paper by Alison Phinney and Gloria Puurveen in this issue.

and clinical care needs; subsequently, their broader needs, those associated with well-being and quality of life, remain difficult to meet.⁵ In addressing this gap, arts-based interventions are increasingly being employed in long-term residential care settings with the goals of promoting positive engagement and social inclusion for the residents. This type of programming understands the arts to have the potential to enrich the lives of people living with dementia through providing opportunities for both creative expression and social inclusion, reflecting the enduring personhood of people living with dementia and the importance of continuing to provide opportunities for meaningful engagement.⁶

For residents living with dementia in long-term residential care settings, the opportunity to participate in meaningful social engagement with a shared purpose not only acknowledges their persistent personhood but also supports their *social citizenship*.⁷ Bartlett and O'Connor's (2010) definition of social citizenship provides an important lens through which people living with dementia are recognized not only in terms of their personhood and social position but also in terms of their potential for, and right to, social inclusion. Drawing on this conceptualization, arts-based programming provides support for social citizenship through creating and facilitating opportunities for people living with dementia "to grow and participate in life to the fullest extent possible."⁸

In this article we discuss a unique arts-based intervention for residents living with dementia in a long-term residential care setting in the Lower Mainland of British Columbia. This article links with the practice exemplar (*Dance, Dementia, and Social Citizenship*) also included in this special issue of *BC Studies* and provides an in-depth discussion of the research study we undertook to examine an innovative intergenerational dance program that provided opportunities for the residents to both partner in dance and participate in relationships supporting their social citizenship.⁹

⁵ Hannah O'Rourke, Wendy Duggleby, Kimberly D. Fraser, and Lauren Jerke, "Factors That Affect Quality of Life from the Perspective of People with Dementia: A Metasynthesis," *Journal of American Geriatrics* 63, 1 (2015): 24–38.

⁶ Renée Beard, "Art Therapies and Dementia Care: A Systematic Review," *Dementia* 11, 5 (2011): 633–56; Hannah Zeilig, John Killick, and Chris Fox, "The Participative Arts for People Living with Dementia: A Critical Review," *International Journal of Ageing and Later Life* 9, 1 (2014): 7–34.

⁷ Ruth Bartlett and Deborah O'Connor, "The Meaning and Value of Social Citizenship," in *Broadening the Dementia Debate: Towards Social Citizenship*, 29–48 (Bristol: The Policy Press, 2010).

⁸ *Ibid.*, 37.

⁹ Shelley Canning, Michael Gaetz, and Darren Blakeborough, "It Takes Time: Building Relationships and Understanding through an Intergenerational Ballet Programme," *Dementia* (pre-published online 30 April 2018).

THE STUDY: EXPLORING BENEFITS OF AN
INTERGENERATIONAL DANCE PROGRAM

The Centre for Education and Research on Aging (CERA) at the University of the Fraser Valley (UFV) undertook a research project exploring the benefits for residents and school-aged children partnering in weekly ballet classes.¹⁰ In our study, school-aged children were partnered with a group of residents living in a neighbouring long-term residential care home in a weekly dance class. All of the resident participants were diagnosed with some type of dementia, with the majority of residents experiencing moderate to advanced stages of the disease. As a result, these residents presented with significant cognitive, communication, and functional challenges that negatively affected their ability to initiate and participate in everyday activities and social relationships.

Our study had full ethical approval from the University of the Fraser Valley Human Research Ethics Board as well as the approval of both the school district and care home boards. The parents or guardians of the children signed informed consent forms, while the children provided ongoing verbal assent for their participation in the study. Similarly, informed consent forms for the residents were obtained from their designated substitute decision-makers, and resident assent related to participation was assessed on an ongoing basis. Recognizing the ethical considerations related to including participants who are unable to provide consent, the research team drew on inclusionary practices in dementia scholarship where consent is understood as *process consent*.¹¹ Thus, we considered consent as a process rather than as a one-time decision. Consequently, we sought expressions of assent from all of the participants throughout the entirety of the research. Process consent also requires that researchers recognize and respect indications of dissent; none of the participants expressed dissent during the study.

The research design for this project involved gathering data through interviews in order to explore the children's experiences; however, in recognizing the cognitive and communication challenges of the residents, the research team filmed the dance classes as a way of capturing their experiences. Gathering visual data through filming allowed the residents' *performative* or *embodied* aspects of expression to guide our understanding of their subjective experiences of dementia.¹² Filming the residents as

¹⁰ Ibid.

¹¹ Jan Dewing, "Participatory Research: A Method for Process Consent with Persons Who Have Dementia," *Dementia* 6, 1 (2007): 1–25.

¹² Lars-Crister Hydén, "Storytelling in Dementia: Embodiment as a Resource," *Dementia* 12, 3 (2013): 359–67.

they partnered with the children in dance provided an opportunity for us to assess their expressions, gestures, and movements as a means of communicating their narratives. At the conclusion of the study, the documentary film *They're Not Scary: An Intergenerational Dance Project* was produced from the video data filmed during the dance classes.¹³ The practice exemplar included in this special issue draws from these video data and this film.

The weekly ballet classes were one hour in length and were led by the artistic director of Imagine Dance, while the data gathering was conducted and supervised by faculty from UFV's CERA. The faculty members recruited UFV undergraduate students as research assistants; their participation in the data gathering, recording field notes, and filming both the interviews and dance classes is beautifully presented in the video embedded in the practice exemplar *Dance, Dementia, and Social Citizenship* included in this issue. These diverse datasets allowed for rich analysis. A general inductive approach to analyzing qualitative data was used to organize and condense the raw interview data and field notes, establishing links and, finally, establishing summary themes.¹⁴ Similar to the analytic process involving the text data, the video data were carefully watched and triangulated with the descriptive video field notes, resulting in the creation of codes and the emergence of summary themes. The analysis process was iterative, initially considering the interview and visual data as separate datasets before considering the complete dataset in the eventual construction of a narrative reflecting the phenomenon of study.¹⁵

Both the documentary film and the study findings demonstrate the residents' abilities to participate in meaningful social engagement in the face of their multiple deficits and losses. As the children and residents participated and partnered together in the dance exercises and routines, relationships were observed to develop and evolve. When the six-month study concluded, it was evident that both the children and residents had become part of a shared, supportive social community. As the final recital was anticipated, rehearsed, and performed, the children and residents were all contributing to a shared goal and purpose, where dementia had slipped into the background.

¹³ Centre for Education and Research on Ageing and Darren Blakeborough, *They're Not Scary: An Intergenerational Dance Project* (Chilliwack, BC: University of the Fraser Valley, 2014).

¹⁴ David Thomas, "A General Inductive Approach for Analyzing Qualitative Evaluation Data," *American Journal of Evaluation* 27, 2 (2006): 237–46.

¹⁵ Frances Maggs-Report, "Best Research Practice: In Pursuit of Methodological Rigour," *Journal of Advanced Nursing* 35, 3 (2001): 373–83.

THE CHALLENGE: RECOGNIZING POTENTIAL AND ENSURING ENGAGEMENT

Participation in meaningful activities and social relationships has been identified as an important indicator of quality of life for people living with dementia in long-term residential care homes. However, supporting opportunities for meaningful engagement in these settings remains challenging on several fronts. Long-term care homes are typically designed and organized around staffing and care routines. As a result, balancing the complex care needs of large numbers of residents with the economics of staffing, facilities, and resources tends to keep the focus on prioritizing care tasks and meeting basic care needs.¹⁶

In addition to the limited time and focus typically paid to supporting meaningful engagement, there is often limited understanding among care staff regarding what actually constitutes meaningful engagement.¹⁷ Care staff may not know how to provide opportunities for meaningful engagement, or, worse, they may not believe that residents living with dementia can benefit from these opportunities.¹⁸ When staff carers view residents living with dementia through a reductionist lens, where the focus is on loss and inability, the residents are seen as *other* than the rest of us, and staff carers have been observed to reduce their care to focus only on tasks associated with basic physical care.¹⁹ Thus, understanding residents living with dementia in terms of their disease, deficits, and disabilities results in diminished opportunities for, and experiences of, meaningful engagement.

Despite their losses, there is evidence to support the enduring potential of people living with dementia to engage and interact in ways that promote their quality of life and well-being. Studies have found that people living with dementia maintain, or experience only slow deterioration of, their basic social skills after admission to long-term residential care. In other words, they maintain the ability to participate in positive

¹⁶ Grace O'Sullivan, "Ethical and Effective: Approaches to Residential Care for People with Dementia," *Dementia* 12, 1 (2013): 11–21.

¹⁷ Jenny Chung, "Activity Participation and Well-Being of People with Dementia in Long-Term Care Settings," *Occupational Therapy Journal of Research* 24, 1 (2004): 22–31; Sunghee H. Tak, Satish Kedia, Tera M. Tongumpun, and Song H. Hong, "Activity Engagement: Perspectives from Nursing Home Residents with Dementia," *Educational Gerontology* 43, 3 (2015): 182–92.

¹⁸ Tracey Hillier and Graham Stokes, "Meaningful Moments," *Journal of Dementia Care* 20, 6 (2012): 27–29; Patrick Doyle and Robert Rubinstein, "Person-Centred Dementia Care and the Cultural Matrix of Othering," *Gerontologist* 54, 6 (2013): 952–63.

¹⁹ David Edvardsson, Bengt Winblad, and P.O. Sandman, "Person-Centred Care of People with Severe Alzheimer's Disease: Current Status and Ways Forward," *Lancet Neurology* 7, 4 (2008): 362–67.

social interactions.²⁰ Even residents living with more advanced dementia have demonstrated the ability to remain socially engaged through participating in a range of activities and group interactions.²¹ People living with dementia have been observed to continue to express positive emotions and caring in the context of these relationships well into the progression of disease symptoms.²²

Our study supports the findings of this literature as we observed that the residents, despite the limitations imposed by their dementia diagnoses, engaged positively with the children in their weekly ballet classes. Our analysis, which involved both participant observation and film footage data, was dominated by images of the residents smiling and laughing as they interacted with the children. Participation in the intergenerational dance classes was eagerly entered into by all of the residents; in fact, for some residents this was the only recreation activity in which they participated.

THE POTENTIAL: SUPPORTING MEANINGFUL ENGAGEMENT THROUGH ARTS-BASED INTERVENTIONS

The nature of the relationship between the arts and society has long been explored.²³ While there has been a tacit understanding that art is integral to humanity, more recently there has been an awareness of the important role that art plays in social change. Both social and economic benefits have been associated with the arts. The arts are seen as a central pillar of progressive community development, augmenting the potential for increased economic benefits through community inclusion and civic participation.²⁴ The arts, along with other forms of culture and sport,

²⁰ Neena Chappell, Helena Kadlec, and Colin Reid, "Change and Predictors of Change in Social Skills of Nursing Home Residents with Dementia," *American Journal of Alzheimer's Disease and Other Dementias* 29, 1 (2014): 23–31.

²¹ Chris Materne, Mary Luszcz, and Ian Goodwin-Smith, "Innovations in Aged Care: Increasing Constructive Engagement and Positive Affect for Residents with Severe and Very Severe Dementia through Group-Based Activities," *Australasian Journal on Ageing* 33, 1 (2014): E7–E10; Antonios M. Politis, Stephen Vozzella, Lawrence S. Mayer, Chiadi U. Onyike, Alva S. Baker, and Constantine G. Lyketsos, "A Randomized, Controlled, Clinical Trial of Activity Therapy for Apathy in Patients with Dementia Residing in Long-Term Residential Care," *International Journal of Geriatric Psychiatry* 19 (2004): 1087–1094.

²² Yvonne Treusch, Julie Pagé, M. Niemann-Mirmedhi, H.E. Gutzmann, Andreas Heinz, and Michael A. Rapp, "Apathy and Its Nonpharmacological Treatment in Dementia," *Journal of Gerontopsychology and Geriatric Psychiatry* 24, 3 (2011): 155–64.

²³ Zeilig et al. "Participative Arts."

²⁴ Department of Canadian Heritage, *Social Impacts and Benefits of Arts and Culture: A Literature Review* (2016), https://publications.gc.ca/site/archivee-archived.html?url=http://publications.gc.ca/collections/collection_2018/pch/CH4-187-2016-eng.pdf (hereafter cited as Dept. of Canadian Heritage); Arts Council England, *The Value of Arts and Culture to People and Society*,

are seen to create bridges and links across diverse social structures with positive benefits for civic development.²⁵

Additionally, the arts are understood to support health through personal enrichment, creativity, and self-expression, which, in turn, underpin subjective well-being.²⁶ The arts also support health through providing opportunities for social inclusion and engagement.²⁷ The literature related to the social impact of the arts has largely focused on enriched quality of life and well-being as well as benefits to physical health.²⁸ However, these outcomes are not mutually exclusive and there is significant crossover between physical and social health benefits. For example, studies examining the benefits of participating in dance programs for individuals living with Parkinson's disease have identified improvements not only to gait and balance but also to quality of life.²⁹

Dementia programming has embraced arts-based interventions. An understanding of the positive relationships between the arts and health, and recognition of the enduring potential and abilities of residents living with dementia, has resulted in the creation and promotion of enriching environments and programming in long-term care homes.³⁰ A wide range of arts-based interventions has been implemented and typically draws on music, dance, visual arts, or drama, with programming focusing on individual benefits in terms of mood and creativity, and with the goals being to promote social interactions and inclusion.³¹ Broadly, arts-based programming seeks to promote quality of life and well-being.

Dance is at the heart of the program explored in our study. As noted earlier, typically, programming involving dance has both social and physical health benefits.³² The goals of dance movement therapy, however, are largely socially oriented, focusing on communication, interaction, reminiscence, and engagement.³³ Thus, this intervention is ideally positioned to support the social citizenship of people living with dementia.

(Manchester: Arts Council England, 2016), <https://www.artscouncil.org.uk/exploring-value-arts-and-culture/value-arts-and-culture-people-and-society> (hereafter cited as Arts Council England).

²⁵ Dept. of Canadian Heritage.

²⁶ Beard, "Art Therapies and Dementia Care"; Dept. of Canadian Heritage.

²⁷ Zeilig et al., "Participative Arts."

²⁸ Arts Council England.

²⁹ Madeleine Hackney and Gammon Earhart, "Effects of Dance on Balance and Gait in Severe Parkinson Disease: A Case Study," *Disability and Rehabilitation* 32, 8, (2010): 679–84.

³⁰ Zeilig et al., "Participative Arts"; Tracey Hillier and Graham Stokes, "Meaningful Moments," *Journal of Dementia Care* 20, 6 (2012): 27–29.

³¹ Beard, "Art Therapies and Dementia Care"; Zeilig et al., "Participative Arts."

³² Madeleine Hackney and Gammon Earhart, "Effects of Dance on Balance and Gait in Severe Parkinson Disease: A Case Study," *Disability and Rehabilitation* 32, 8, (2010): 679–84.

³³ Beard, "Art Therapies and Dementia Care."

In dance movement therapy programming, the music and movement are uniquely tailored to each individual's needs and abilities, thus recognizing their personhood.³⁴ People living with dementia struggle with communication as their disease progresses; and, through the embodied nature of the dance partnerships, dance supports their nonverbal ways of communicating.³⁵ While measuring outcomes related to well-being, meaning, and quality of life is challenging, the literature highlights the positive outcomes of dance movement therapy for people living with dementia in terms of increased positive affect, communication, and behaviours.³⁶

Our study brought children and care home residents together through dance. Most of the literature related to intergenerational programming focuses primarily on the benefits for people living with dementia; however, as our study findings demonstrate, these programs are built around partnerships and relationships that have potential benefits for both the older adults and the children.³⁷ Intergenerational programming has been explored in a variety of settings in the community and long-term residential care homes, and has involved partnering older adults with children aged from toddlers to teenagers.³⁸ Similar to the findings in literature related to dance movement therapy programming, positive social impacts have been reported for people living with dementia who participate in intergenerational programs. These benefits include positive affect and attitude, improved communication, and the forming of social relationships.³⁹ Benefits for the children participating in intergenerational programming include increased levels of empathy and positive views of

³⁴ Richard Coaten and Donna Newman-Bluestein, "Embodiment and Dementia – Dance Movement Psychotherapists Respond," *Dementia* 12, 6 (2013): 677–81.

³⁵ Ibid.

³⁶ Azucena Guzmán-García, Julian C. Hughes, Ian A. James, and Lynn Rochester, "Dancing as a Psychosocial Intervention in Care Homes: A Systematic Review of the Literature," *International Journal of Geriatric Psychiatry* 28 (2013): 914–924; Jennifer Lapum and Rachel Bar, "Dance for Individuals with Dementia," *Journal of Psychosocial Nursing and Mental Health Service* 54, 3 (2016): 31–34.

³⁷ Bethany Galbraith, Hannah Larkin, Aynsley Moorhouse, and Tamara Oomen, "Intergenerational Programs for Persons with Dementia: A Scoping Review," *Journal of Gerontological Social Work* 58, 4 (2015): 357–78.

³⁸ Ibid.

³⁹ Ibid.; Carol Burgman and Elizabeth Mulvaney, "An Intergenerational Program Connecting Children and Older Adults with Emotional, Behavioural, Cognitive or Physical Challenges: A Gift of Mutual Understanding," *Journal of Intergenerational Relationships* 14, 4 (2016): 353–59; Bridget McNair and Krista Moore, "The Effects of Intergenerational Programs on Individuals with Alzheimer's Disease or Dementia," *Annual in Therapeutic Recreation* 18 (2010): 141–56.

people living with dementia, thus reducing stigma and negative stereotypes.⁴⁰

Typically, the incorporation of arts-based programming in long-term residential care homes is understood in one of two ways. Arts-based programming is employed to either promote outcomes aimed at reducing the challenging behavioural and psychological symptoms of dementia or to promote outcomes focused on the enrichment and subjective well-being of the resident.⁴¹ The intergenerational dance program discussed here focuses on the latter. For the resident participants, the program goals were to provide enriching opportunities for creativity through their engaging in music and movement, while supporting their participation in a broader social community and their growth through partnerships and the development of relationships. Program goals for the children focus primarily on forming intergenerational relationships in an effort to support the development of positive perceptions of age and aging.⁴²

PARTNERING THROUGH DANCE: IMAGINE DANCE

Our study examines the benefits for both the children and the residents participating in Imagine Dance, an innovative arts-based program that blends dance music therapy and intergenerational programming in long-term residential care homes. Imagine Dance combines these two modalities in a multi-sensorial experience whereby music, movement, colour, and touch are integrated while emphasizing the development of partnerships and relationships as evidenced in this issue's practice exemplar, *Dance, Dementia, and Social Citizenship*. This program highlights the unique background of its artistic director and creator. A trained expressive arts therapist, she draws on her background as a professional dancer, choreographer, and dance instructor, as well as on her previous experiences as a registered nurse working in long-term residential care, to create opportunities for children and people living with dementia to form meaningful relationships.

Imagine Dance is built around a series of traditional ballet exercises that have been adapted to the physical and cognitive abilities of residents living with dementia in long-term residential care homes. For example,

⁴⁰ Teresa Atkinson and Jennifer Bray, *Dementia Awareness and Intergenerational Exchange in Schools: A Pioneer Project Supporting Dementia Friendly Communities*, (Coventry: Association for Dementia Studies, 2013), https://www.alzheimers.org.uk/site/scripts/download_info.php?fileID=2306.

⁴¹ Beard, "Art Therapies and Dementia Care."

⁴² Canning et al., "It Takes Time."

traditional ballet exercises such as *pliés* have been modified for the children and ambulatory residents to perform together using walkers as ballet bars, while non-ambulatory residents partner with the children to perform *pliés* using their arms. While Imagine Dance provides opportunities for the residents to engage in physical movement and enriching creative activities, the primary goal of the program lies in the opportunities for the residents to establish social contact and emotional connections with the children.

Drawing on dance movement therapy, the dance classes focus on embodied communication through social partnership.⁴³ The children and residents frequently touched as they partnered in dance exercises; the children also learned to look for nonverbal communication, bringing their faces close to the residents and looking *eye to eye* to evaluate the residents' facial expressions. The residents performed modified ballet exercises while seated in wheelchairs, wearing their bedroom slippers, while the children wore ballet leotards and dance slippers as they began to learn the basic ballet positions and movements for arms and feet. Developing partnerships were clearly evident as the children stood in front of the residents demonstrating *first position* and encouraging the residents to mirror them.

During our six-month research project, we observed the residents and children becoming increasingly familiar and comfortable in dancing with each other. Each dance class began with the *name train*, whereby the children sequentially went around to each resident greeting her or him by name. The *name train* allowed the children to meet each resident individually, with the support and guidance of the artistic director. Initially the children hung back, despite the residents' enthusiastic responses. However, over time the children became more comfortable; as their hesitation disappeared, names were changed to fun nicknames, which reflected shared jokes and an increasing closeness as the children and residents began to establish relationships. One of the more outgoing residents was delighted when the children bestowed upon him the nickname "Grandpa."

As the weeks passed, both the residents and children demonstrated increased familiarity with each other and with the expectations of the dance classes. During week four, all the dancers were challenged in learning how to perform a leg lift, or *grand battement*. While legs were raised to varying heights, the *grand battement* presented a challenge for one of the residents who had severe physical deficits. However, in

⁴³ Coaten and Newman-Bluestein, "Embodiment and Dementia."

meeting this challenge, the children were excited to see him reach down and lift his leg using his hands. This is an example of the extent to which the residents were continually observed to be *trying*; they were clearly motivated by the children to participate fully despite their challenges. Their efforts weren't lost on the children, who celebrated the residents' efforts and abilities. As one of the children observed, "they're able to dance but in a different way from us."

Relationships were built between the children and residents as they became partners in the dance classes. These were relationships born of mutual goals, as during each class they had to practise the dance exercises and in order to eventually perform a dance in the final recital. The differences in their abilities became less obvious as the children began to see the value of their resident dance partners: "Like we get together as partners and we help them . . . [and] they help us. They help us help them do better."

These relationships were also built around fun. The residents and children laughed a lot with each other, with the residents usually taking the lead in making jokes. For example, while practising pointing and stretching their toes, one of the residents called out "that's hard," while another observed, "I got a cramp just from watching them!" The room dissolved in laughter. This was a frequent occurrence during dance classes.

As they all prepared for the final recital, the children described how they partnered with the residents, helping each other in performing the dance routines. Clearly, their perceptions of the residents had shifted from focusing on their disabilities and differences to viewing them as true dance *partners* whose roles were valued.⁴⁴ Over time, the children had come to recognize and appreciate the abilities of the residents to participate fully in the dance classes.

As we analyzed the residents' experiences, we were struck by examples of their individual and enduring abilities. As noted above, despite their having significant cognitive deficits and physical limitations, we observed, among all of the residents, a strong motivation to *try* during the dance classes. At a glance, the residents with the most significant limitations did not appear to be participating, but close observation revealed their slight movements and steady gazes as they concentrated on *trying* to perform the dance exercises.

Demonstrations of nurturing and assistance were also evident as residents tucked the stray hairs behind the children's ears and gently cupped the children's faces as they listened to their chatter. These

⁴⁴ Canning et al., "It Takes Time."

everyday actions occurred spontaneously as a result of social opportunities provided by the residents' partnering with the children. The opportunities for familiar physical activities and social connections that occurred through participating in Imagine Dance point to the residents' enduring personhood and social citizenship.

Our study highlighted important outcomes related to promoting positive understandings of age and aging for the children, and promoting meaningful engagement for the residents through participating in Imagine Dance. Subsequently, the importance of supporting and promoting these intergenerational relationships has also been recognized within the local school district and health authority, where Imagine Dance is now being incorporated into the recreation programming of several long-term residential care homes in two neighbouring cities in British Columbia's Lower Mainland. With the local elementary schools and care homes frequently being in close proximity in these communities, there is great potential for building creative partnerships between neighbours, as seen with the Imagine Dance experience.

CONCLUSION

As increasing numbers of people living with dementia require the care provided in long-term residential care homes,⁴⁵ it is important to consider how best to meet their needs with respect to well-being and quality of life. This requires taking a broad view that recognizes their personhood and enduring abilities despite their losses. This understanding also recognizes the importance of providing opportunities for the residents to engage in meaningful activities and relationships. Increasingly, arts-based programs like Imagine Dance are providing these opportunities in long-term care homes in British Columbia. Through providing opportunities for residents living with dementia to participate in a social community, to work towards a common purpose, and to be free from discrimination, programs like Imagine Dance both recognize their personhood and support their social citizenship.

⁴⁵ Statistics Canada, *Research Highlights on Health and Aging*, <http://www.statcan.gc.ca/pub/11-631-x/11-631-x2016001-eng.htm>.

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